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Federal State Budget Educational Institution
of Higher Education
Pacific State Medical University
of the Ministry of Health of the Russian Federation

APPROVED BY

Director of the Institute of Therapy (Internal
Medicine) and Instrumental Diagnostics

_____/ Nevzorova V.A./

“2nd” of April 2026

COLLECTION OF ASSESSMENT TOOLS

B2.C.03(E) Introductory practical training (Medical rehabilitation and disease prevention) of the basic educational program of Higher Education

Specialty	31.05.01 General Medicine (English-language program) (code, name)
Degree	Specialist's degree
Profile	02 "Healthcare" (in the field of providing primary health care to the population in medical organizations: polyclinics, outpatient clinics, inpatient/outpatient facilities of the municipal health care system)
Mode of study	Full-time
Period of mastering the BEP	6 years (nominal length of study)
Institute	of Clinical Neurology and Medical Rehabilitation

Vladivostok, 2026

1. INTRODUCTION

1.1. Collection of Assessment Tools is a document that regulates the format, content, and types of assessment tools for continuous assessment, interim examination and final (state final) examination, and graded criteria for each type of assessment tools.

1.2. Assessment tools allows to evaluate the development of universal, general professional, and professional competencies (UCs, GPCs and PCs respectively) outlined in Federal State Educational Standard of Higher Education and defined in the basic educational program of higher education for the specialty 31.05.01 General Medicine (English-language program), profile 02 "Healthcare" (in the field of providing primary health care to the population in medical organizations: polyclinics, outpatient clinics, inpatient/outpatient facilities of the municipal health care system).

([BEP HE for the 31.05.01 General Medicine \(English-language program\)](#)), section 3. Learning Outcomes Requirements of the Basic Educational Program of Higher Education)

2. DOCUMENT BODY

2.1. Types of Assessment, Formats of Assessment Tools

No.	Types of assessment	Assessment Tools Format
1	Continuous assessment	Tests
		Maintaining the Practical Training Log
		Independent work and individual assignment
		Preparation of sketches of leaflets on developing healthy lifestyle skills and correcting risk factors of the most common diseases
		Mini-Case Studies
2	Interim assessment	Tests
		Maintaining the Practical Training Log
		Research activity summary
		Review of the training supervisor

3. The contents of assessment tools for continuous and interim examination are prepared by the teacher of the course

Assessment tool 1

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.01	General Medicine (English-language program)
C	GPC-8	Able to implement and monitor medical rehabilitation of a patient, including implementation of individual rehabilitation programs and habilitation programs for people with disabilities, as well as assess ability to work of a patient
I		ANSWER LEVEL 1 TEST QUESTIONS (ONE CORRECT ANSWER)
		1. Function of an organ, system of organs, or the organism as a whole is assessed using the 1) method of anthropometric standards 2) index method 3) functional tests

	4) correlation method 2. Simple functional tests include 1) squatting submaximal fitness test 2) Maximal Voluntary Inspiratory Breath-Holding Time (MVIBHT) Test 3) Ruffier test 4) Troitsky test 3. Functional tests are conducted and assessed by 1) a nurse 2) a doctor 3) a member of junior medical personnel 4) an instructor 4. Anthropometric data allows to assess 1) physical fitness 2) social health 3) mental development 4) overall health 5. At the first stage of rehabilitation, a patient with low rehabilitation potential should be referred to 1) palliative care department 2) nursing unit 3) second stage of rehabilitation 4) an outpatient clinic under a doctor's supervision 6. The type of breathing exercises that promotes transportation of bronchial secretion into trachea is called 1) Airway Clearance Techniques 2) dynamic exercise 3) static exercise 4) mixed exercise 7. Active dynamic exercise is made easier using 1) exercising in water 2) exercise equipment 3) gymnastic apparatus 4) exercise machines 8. Rehabilitation diagnosis is made using the 1) ICD-10 2) ICD-11 3) International Classification of Functioning, Disability and Health (ICF) 4) nosology classification 9. Multidisciplinary rehabilitation team does NOT include 1) a speech therapist 2) a district doctor 3) a medical psychologist 4) a profile specialist
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		10. Individual rehabilitation program is developed by the 1) multidisciplinary rehabilitation team 2) head of the department 3) district doctor 4) disability examination specialist
		ANSWER LEVEL 2 TEST QUESTIONS (MULTIPLE CORRECT ANSWERS)
		1. Anthropometric data is collected using 1) scales 2) stadiometer 3) dynamometer 4) measuring tape 2. Non-pharmaceutic treatment methods include 1) massage 2) physical therapy 3) mineral waters 4) injections 3. Natural therapeutic factors used in health resort treatment include 1) climatotherapy 2) pelotherapy 3) balneation 4) electrotherapy 4. Contraindications for massage therapy include 1) 38°C fever 2) BP 150/90 mmHg 3) purulent processes 4) low muscle tone 5. Movement regimens at the inpatient stage of rehabilitation include 1) strict bed rest 2) semi-strict bed rest 3) moderate physical activity 4) increased physical activity 6. Criteria for transferring a patient from strict bed rest to semi-lying movement regimen 1) positive improvements in the patient's condition 2) positive functional tests 3) patient's request 4) lack of junior medical personnel 7. Rehabilitation equipment for patients with impaired functioning of the musculoskeletal system includes 1) cane 2) crutches 3) biotonic orthotic device 4) seeing-eye dog 8. The choice of crutches is impacted by 1) the patient's age 2) the patient's weight

		3) the patient's sex 4) 4) the patient's request 9. An individual rehabilitation program is NOT developed by 1) the multidisciplinary rehabilitation team (MDRT) 2) the head of the department 3) the district doctor 4) a specialist in medical and social expertise 10. A specific regime of physical activity is not prescribed to the patient by 1) the doctor 2) the ward nurse 3) the patient determines the regime himself 4) the head nurse 5) relatives of the patient																																		
I		ANSWER LEVEL 3 TEST QUESTIONS (MATCHING QUESTIONS)																																		
		1. Match the following <table><tr><th>Functional test or an indicator</th><th>Methodology of the test or calculation of the indicator</th></tr><tr><td>1 Body Mass Index</td><td>A) VC in mL per 1 kg of body mass</td></tr><tr><td>2 Orthostatic test</td><td>B) Breath-holding test</td></tr><tr><td>3 Pulmonary capacity-body mass index</td><td>C) Functional test with 20 squats in 30 seconds</td></tr><tr><td>4 Maximal Voluntary Inspiratory Breath-Holding Time (MVIBHT) Test</td><td>D) Functional test with changing body position</td></tr><tr><td>5 Squatting submaximal fitness test</td><td>E) Body mass in grams per 1 cm of height</td></tr><tr><td></td><td>F) Reflects the strength of flexors of the hand in kg relative to body mass</td></tr></table> 2. Match the following <table><tr><th>Anthropometric indicator</th><th>Equipment</th></tr><tr><td>1 VC</td><td>A) Dynamometer</td></tr><tr><td>2 Muscle strength</td><td>B) Spirometer</td></tr><tr><td>3 Height</td><td>C) Scales</td></tr><tr><td>4 Chest circumference</td><td>D) Stadiometer</td></tr><tr><td></td><td>E) measuring tape</td></tr></table> 3. Match the following <table><tr><th>Muscle contraction type</th><th>Physiological changes in the muscle</th></tr><tr><td>1 Concentric contraction</td><td>A) Muscle stretches/lengthens</td></tr><tr><td>2 Eccentric contraction</td><td>B) Muscle length remains the same, but muscle strain increases</td></tr><tr><td>3 Isometric contraction</td><td>C) Muscle shortens</td></tr></table>	Functional test or an indicator	Methodology of the test or calculation of the indicator	1 Body Mass Index	A) VC in mL per 1 kg of body mass	2 Orthostatic test	B) Breath-holding test	3 Pulmonary capacity-body mass index	C) Functional test with 20 squats in 30 seconds	4 Maximal Voluntary Inspiratory Breath-Holding Time (MVIBHT) Test	D) Functional test with changing body position	5 Squatting submaximal fitness test	E) Body mass in grams per 1 cm of height		F) Reflects the strength of flexors of the hand in kg relative to body mass	Anthropometric indicator	Equipment	1 VC	A) Dynamometer	2 Muscle strength	B) Spirometer	3 Height	C) Scales	4 Chest circumference	D) Stadiometer		E) measuring tape	Muscle contraction type	Physiological changes in the muscle	1 Concentric contraction	A) Muscle stretches/lengthens	2 Eccentric contraction	B) Muscle length remains the same, but muscle strain increases	3 Isometric contraction	C) Muscle shortens
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Assessment criteria

“Very good” – 90-100% correct answers of questions of every level

“Good” - 80-89% correct answers of questions of every level

“Satisfactory” - 70-79% correct answers of questions of every level

“Unsatisfactory” - less than 70% correct answers of questions of every level

Assessment tool 2

Practical Skills Assessment Checklist

Practical Skill Name "Measuring blood pressure"

C	GPC-8	Able to implement and monitor medical rehabilitation of a patient, including implementation of individual rehabilitation programs and habilitation programs for people with disabilities, as well as assess ability to work of a patient	
	Action	Performed	Not Performed
1.	Offer (help) the patient to get in a comfortable position on the examination couch (lying on one's back, legs straight, arms not flexed)	1 point	0 points
2.	Pull up the patient's sleeve above their elbow, leaving one layer of clothing	1 point	0 points
3.	Place the cuff of the sphygmomanometer on the patient's upper arm	1 point	0 points
4.	Make sure two fingers can fit between the cuff and the surface of the patient's upper arm	1 point	0 points
5.	Make sure that the lower edge of the cuff is 2.5 cm above the patient's cubital fossa	1 point	0 points
6.	Place two fingers of one's left hand on the patient's wrist in order to assess radial pulse	1 point	0 points
7.	Tighten the air valve of the bulb of the sphygmomanometer with one's other hand	1 point	0 points
8.	Inflate the cuff of the sphygmomanometer using the bulb until radial pulse disappears	1 point	0 points
9.	Take note of the measurement on the pressure gauge the moment radial pulse disappears	1 point	0 points
10.	Deflate the sphygmomanometer cuff by loosening the air valve	1 point	0 points
11.	Place the head of the stethoscope diaphragm-down on the projection of the ulnar artery in the patient's cubital fossa, apply light pressure	1 point	0 points
12.	Inflate the sphygmomanometer cuff again until the measurement on the pressure gauge exceeds previous measurement by 30 mmHg	1 point	0 points
13.	Slowly deflate the sphygmomanometer cuff without moving the head of the stethoscope	1 point	0 points
14.	Take note of the measurement on the pressure gauge the moment the first Korotkoff sound appears (systolic blood pressure)	1 point	0 points
15.	Take note of the measurement on the pressure gauge the moment the last clear Korotkoff sound disappears (diastolic blood pressure)	1 point	0 points
16.	Control the disappearance of the sounds by continuing the auscultation until the pressure drops 15-20 mmHg after the last sound	1 point	0 points
17.	Deflate the sphygmomanometer cuff by loosening the air valve	1 point	0 points
18.	Remove the sphygmomanometer cuff from the patient's arm	1 point	0 points
19.	Tell the patient the results of the measurement	1 point	0 points
20.	Write down the result in the patient's medical record	1 point	0 points
	Total	20 points	

Final grade: "Pass" / "Fail"

Assessment criteria:

"Pass" - at least 75% of required actions performed

"Fail" - 74% of required actions or less performed

Assessment tool 3: Practical Training Log

Assessment tool 4: Research activity (research activity summary)

Assessment tool 5: Independent work of the student and individual assignment

Assessment tool 6: Review of the training supervisor

4. Assessment criteria for learning outcomes

"Very good" grade is given to a student who possesses knowledge of the subject in full scope outlined in the curriculum, has a sufficiently deep insight into the subject; is able to answer all questions clearly, exhaustively, and with no outside help; structures their answers logically, with emphasis on the most important information; is able to analyze, compare, classify, summarize, refine, and structure the course content, giving particular attention to cause-and-effect relationships.

"Good" is given to a student whose knowledge of the subject is almost in full scope outlined in the curriculum (gaps are only present in the knowledge of some especially complex aspects); is able to answer questions exhaustively with little to no outside help; does not always put emphasis on the most important information, but does not make significant mistakes.

"Satisfactory" is given to a student who possesses the bulk of knowledge on the subject; has difficulties answering questions with no outside help, uses imprecise wording; makes mistakes in substantial number of their answers.

"Unsatisfactory" is given to a student who does not have the mandatory minimum of knowledge on the subject, is not able to give an answer even with additional guiding questions.